Scouts Canada Halifax Region
CAMP LONE CLOUD

ISLAND RENTAL APPLICATION

Mail Completed Forms to:

Scouts Canada - Halifax Region
6232 QUINPOOL RD, HALIFAX, NS, B3L 1A3

This Island Rental Application Form must be completed in full to reserve Camp Lone Cloud for your event. Scouts Canada, Hold Harmless Agreement can be found on this web site - please download a copy and attach with your application. It is your responsibility to read and respect the Camp Rules and Regulations.

Name of Group: _____

Date Camp Lone Cloud Required: _____ **Number of Participants:** _____

Purpose of Event: _____

Mailing Address: _____
(Street / Apt. #)

_____
(City) **(Prov.)** **(Postal Code)**

Phone: _____ **E-Mail:** _____

Name of Contact: _____

Home Phone: _____ **Cell Phone:** _____

Work Phone: _____ **E-Mail:** _____

A non-refundable deposit of 50% is required to guarantee all applications. A damage deposit of $100 must accompany all applications. (The damage deposit will be refunded within four weeks of the rental date following an acceptable property inspection.) The Rental Fee includes island facilities and transportation between the mainland dock and Camp Lone Cloud Island.

		Scouting	Non-Scouting	Corporate	Totals
Day Rate	Base fee	$150.00	$150.00	$800.00	
	Add Per Person Fee	$2.00	$3.00		
Weekend Rate	Base fee	$300.00	$300.00		
	Add Per Person Fee	$4.00	$5.00		
	TOTAL COST OF CAMP RENTAL				

Day Rate begins at dawn and ends at dusk on each rental day. Overnight stays are charged as two days.
Weekend Rate commences on Friday at 4:00 PM and ends on Sunday at 4:00 PM. (Groups can arrive and depart at any time between these hours.)

Please Note: The possession of Alcoholic Beverages or Mood Altering Substances in any form is strictly prohibited on Camp Lone Cloud Island. Non-compliance will result in forfeiture of your deposit and immediate removal of the group from the island. I have read, understand and agree to comply with statements on this application and the Camp Rules and Regulations.

Applicant's Signature: _____ **Date:** _____

FOR OFFICE USE ONLY		
Deposit:	Receipt No:	Date:
Balance Due:	Receipt No:	Date:
Damage Deposit Received	Receipt No:	Date:
Damage Deposit Returned		Date:
Camp Lone Cloud User Manual Received		Date:
Application Taken By:		